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FOR NUMBER FILED MUMBER EXTRA  FOR NUMBER FILED MUMBER EXTRA  RATE FEE  RATE FEE  OR SMALL ENTITY  OR X x 1 = 500  OR	PATENT APPLICATION FEE DETERMINATION RECORD  Substitute for Form PTO-875  Under the Paperwork Reduction Act of 1995, no persons are required to respect to a substitute for Point PTO-875  Application or Docket Number 09/972/19										
### BASIC FEE  ### BY CR 1.18(a)  ### TOTAL CLAIMS  ### CR X * * * * * * * * * * * * * * * * * *						SMALL I	SMALL ENTITY		OTHER THAN OR SMALL ENTITY		
(2) CR 1.18(a)					REXTRA	RATE	FEE ·		RATE	FEE	
TOTAL CLAIMS (37 CPR 1.16(b))  WE the difference in column 1 is less than zero, enter 'U' in column 2.  CLAIMS AS AMENDED - PART II  (Column 1)  (Column 2)  (Column 3)  FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CPR 1.16(d))  CLAIMS  (COlumn 1)  (Column 2)  (Column 3)  (Column 3)  (Column 3)  (Column 3)  (Column 3)  (Column 4)  (Column 4)  (Column 3)  (Column 3)  (Column 3)  (Column 4)  (Column 4)  (Column 4)  (Column 5)  (Column 6)  (Column 6)  (Column 7)  (Column 7)  (Column 8)  (Column 8)  (Column 1)  (Column 1)  (Column 2)  (Column 3)  (Column 3)  (Column 3)  (Column 3)  (Column 4)  (Column 6)  (Column 6)  (Column 7)  (Column 7)  (Column 8)  (Column 1)  (Column 1)  (Column 1)  (Column 1)  (Column 2)  (Column 3)  (Column 3)  (Column 3)  (Column 3)  (Column 3)  (Column 1)  (Column 1)  (Column 3)  (Column 4)  (Column 3)  (Column 3)  (Column 3)  (Column 4)  (Column 3)  (Column 3)  (Column 4)  (Column 4)  (Column 3)  (Column 4)  (Column 4)  (Column 4)  (Column 4)  (Column 5)  (Column 6)  (Column 6)  (Column 6)  (Column 7)  (Column 7)  (Column 7)  (Column 7)  (Column 8)  (Column 8)  (Column 8)  (Column 1)  (Column 3)  (Column 3)  (Column 3)	BASIC FEE						<u> </u>	OR		<u> </u>	
Column 1   Column 2   Column 3	TOTAL CLAIMS // 10 : 10						X.\$=		OR	x = 11 =	504
MAINTPLE DEPENDENT CLAIM PRESENT (37 CFR 1.18(d))  "If the difference in column 1 is less than zero, enter "O" in column 2.  CLAIMS AS AMENDED — PART II  (Column 1)  (Column 2)  (Column 3)  (Column 3)  (Column 3)  (Column 3)  (Column 4)  (Column 4)  (Column 5)  (Column 5)  (Column 6)  (Column 6)  (Column 6)  (Column 7)  (Column 7)  (Column 8)  (Column 8)  (Column 1)  (Column 1)  (Column 1)  (Column 2)  (Column 3)  (Column 3)  (Column 3)  (Column 3)  (Column 1)  (Column 1)  (Column 1)  (Column 1)  (Column 2)  (Column 3)  (Column 3)  (Column 3)  (Column 1)  (Column 1)  (Column 1)  (Column 1)  (Column 1)  (Column 2)  (Column 3)  (Column 3)  (Column 1)  (Column 1)  (Column 3)  (Column 4)  (Column 4)  (Column 4)  (Column 5)  (Column 5)  (Column 6)  (Column 6)  (Column 7)  (Column 7)  (Column 8)	INDEPENDENT CLAIMS 2						X		OR	X \$ =	
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COLUMN 1) (COLUMN 2) (COLUMN 3)  CLAIMS  REMAINING  AFTER 1  PREVIOUSLY PRESENT  FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 GFR 1.18(d))  COLUMN 1) (COLUMN 2) (COLUMN 3)  COLUMN 1 Minus  COLUMN 1 MI	. R D	e difference in o	olumn 1 is less tha	in zero, en	ter "O" in column 2	TOTAL	<u></u>	OR	IOIAL		
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(Column 1) (Column 2) (Column 3)  CLAIMS   HIGHEST   PRESENT   EXTRA   AMENDMENT   PAID FOR    Total (a) CPR 1.18(b) (2) CPR 1.18(d)    FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))  CLAIMS   HIGHEST   PRESENT    TOTAL   ADOL FEE    RATE   ADOL FEE    RATE   ADOL FEE    RATE   ADOL FEE    RATE   ADOL FEE    CR   X \$ _ =    TOTAL   ADOL FEE    CR   ADOL FEE		Independent (37 CFR 1.14(b))	1)	Menus	()		× *		OR	× 8 1 12	
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* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.	-	<b>-</b>	and the bases of the	a tha cata	u in antumn 2 will	e 117 in column :			1 os	ACCULPEE	

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1,14. This collection is estimated to take 12 minutes to complete, including pathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case, Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Atexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450,